fat Broker

MULTIP EPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO. SIGNATURE OF SILING DATE
APPLICANTS)

AS I	FILED ·	A	TER		· AF	
			4 4744	1	Ar.	TER
AIND.		I"AM	ENDMEN		2 AME	NDMENT
	DEP.	IND.	DE	۲.	IND.	DEP.
	 	 	1-7			
			1-1			
			1			
						:
			1_1			
	 	 		_		
<u> </u>	 	 	-	_		
	 	 	 	_		
	 	 	 			
		 	 	-1		
		 	1-	-1		
		 	1-1-	-1		
			1	1		
				7		
			-	7		
		<u> </u>		4		
				-		
			ļ	4		
				╅		
				+		
				1		
				+		
				1		
				4		
				- -		
			·	- -		
			··	╁		
		•		1		
				_		
				1		
				I		
				\perp		
				1		
				1		
 -	— <u>—</u> —].			4-		
	4		4			4
	4	X	♦ 3			ta .
		5/3 l			Ē	
	V. (1/04)	V. 1104)	23	# 1 # 1 # # 23 # # # 23 # # # # 23 # # # # # #	# 1 # 23 # 4 # 33 # # 33 # # 4 # 33 # # # 33 # # # #	# 23 # E